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Bib Data Sheet

CONFIRMATION NO. 1234

<b>SERIAL NUMBER</b> 09/283,585	<b>FILING DATE</b> 04/01/1999 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2644	<b>ATTORNEY DOCKET NO.</b> 103176	
<b>APPLICANTS</b> LARS ARKNAES-PEDERSEN, STRUER, DENMARK; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> DENMARK 0515/98 04/08/1998 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/19/1999</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <input checked="" type="checkbox"/> Allowance Verified and Acknowledged <u>RA</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> DENMARK	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 25944					
<b>TITLE</b> METHOD AND AN APPARATUS FOR PROCESSING AN AUSCULTATION SIGNAL					
<b>FILING FEE RECEIVED</b> 1052	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/283,585	FILING DATE 04/01/99	CLASS 381	GROUP ART UNIT 2747	ATTORNEY DOCKET NO. 103176
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APPLICANT

LARS ARKNAES-PEDERSEN, STRUER, DENMARK.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED DENMARK 0515/98 04/08/98

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/19/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DKX	SHEETS DRAWING 8	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS

OLIFF & BERRIDGE PLC  
P O BOX 19928  
ALEXANDRIA VA 22320

TITLE

METHOD AND AN APPARATUS FOR PROCESSING AN AUSCULTATION SIGNAL

FILING FEE RECEIVED  \$1,052	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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